

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7		10/27/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AS	538	11-15-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -: ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	9/23/01
2	10/27/01
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27	✓
28	✓
29	0
30	✓
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37	✓
38	0
39	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here